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HEALTH DEPARTMENT
OFFICE OF THE SUPERINTENDENT OF HEALTH
CITY HALL, PROVIDENCE

April 1, 1922.

Dear Dr. Dublin:

Your favor of the 30th of March with enclosures came duly to hand.

I agree entirely as to the desirability of brevity in the summary reports in the different cities. The reports which you sent me seem to figure out a little above your upper limit. It seems to me desirable to cut these down, if possible, and believe that this could be done without sacrificing anything of importance. I doubt if it is necessary to say much, if anything, about the general organization of the city, and the organization of the health department could be touched upon very briefly. Nothing should be omitted of Dr. Emerson's excellent handling of the appointment of the health officer, civil service, control of employees, and pernicious politics. It seems to me that, with care, these summaries could be cut down 20% and yet contain every bit of the meat that is now in them. The style is excellent, but I do not believe that anything would be lost by a little condensation. A more condensed style is, of course, a little more difficult, but I believe, gains rather than loses in force.

The material covered in these reports seems to be entirely adequate, and I think that Dr. Emerson has been very happy in stressing the good and the bad. I do not think he has been too harsh. Perhaps it might be well, in some cases, to make a more direct statement of the major recommendation.

The greatest care should be taken in making the expenses of the health departments comparable. Dr. Emerson seems to have done this in these reports, but I would think it desirable in the preface or in the introduction to the series, to specify what is included in "health services".

I am a little skeptical about the use of vital statistics as a measure of health department efficiency. Probably the crude death rate in the cities under survey depends more upon the geographical location and upon the race, nationality, age constitution and economic condition of the population than it does upon the health activities of the municipality. The typhoid death rate is, however, a very good indication of a certain class of activity, but these activities are not usually a function of the health department. Infant mortality we know depends largely upon economic status, and it would take several times the effort and money to reduce the infant mortality rate of Fall River and New Bedford to 84, if it could ever be done, than it has to reduce it to 84 in Rochester. We know too little about the causes of the decline in tuberculosis to use this death rate as an index.

Of course I have no business to butt in on Dr. Emerson's expressed opinions, but I am glad to see that he speaks of the difficulties of local officials carrying on V. D. work when cases are reportable to State authorities. I am very firmly of the opinion that the local authorities should carry on all V. D. and all T. B. work and that cases should therefore be reported to the local health officer. It is a very minor matter, of course, but I was sorry to see that in the report on Scranton, it is stated that telephonic reports of contagious disease should be confirmed by written reports. I believe this is an unnecessary hardship on the physicians. I have not required written reports for a long time, and have found no objection to the method whatever.

On the whole I believe these reports are very satisfactory indeed, and my only real suggestion is that they be condensed which I think can be done without sacrifice.

Yours truly,

(Signed) Charles V. Chapin

(m. D.)